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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>		Attorney Docket Number	AID-3.2.001/4203
[ X ] Declaration Submitted with Initial Filing		First Named Inventor	Robert Newsteder
<b>COMPLETE IF KNOWN</b>			
[ ] Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)		Application Number	TO BE ASSIGNED
OR		Filing Date	CONCURRENTLY HEREWITH
		Group Art Unit	TO BE ASSIGNED
		Examiner Name	TO BE ASSIGNED

As a below named inventor, I have declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**DIRECTORY INFORMATION SYSTEM FOR PROVIDING  
TOLL FREE TELEPHONE NUMBERS**

the specification of which

[ X ] is attached hereto

OR

[ ] was filed on (MM/DD/YYYY) \_\_\_\_\_ as United States Application Number of PCT International Application Number \_\_\_\_\_ and was amended on (MM/DD/YYYY) \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached Yes	Certified Copy Attached No
			[ ] [ ] [ ] [ ]	[ ] [ ] [ ] [ ]	[ ] [ ] [ ] [ ]

[ ] Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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Burden Hour Statement. This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO Assistant Commissioner for Patents, Washington, DC 20231

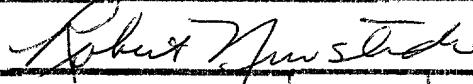
PTO/SB/01 (03-01)

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## DECLARATION - Utility or Design Patent Application

<input checked="" type="checkbox"/> Direct all correspondence to: <u>[X]</u>		Customer Number or Bar Code Label: <u>26784</u>	OR <input type="checkbox"/> Correspondence address below
Name			
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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (First and middle [if any]) <u>Robert</u>		Family Name or Surname <u>Newsteder</u>	
Inventor's Signature 	Date: <u>Nov. 15</u> 2001		
Residence:	State	Country.	Citizenship: U.S.A.
Mailing Address: 225 Merchandise Avenue			
City: Elmont	State, New York	ZIP 11003	Country: U.S.A.
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (First and middle [if any])		Family Name or Surname	
Inventor's Signature	Date		
Residence, City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country
<input type="checkbox"/> Additional inventors are being named on _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto			

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